Date: 212-02 Label No. ELTO9114 327US

I hereby certify that the date indicated above, I deposited this paper or fe with the U.S. Postal Service and that it was addressed for delivery to the Commissioner for Patents, Washington, DC 20231 by "EXPRESS MAI Post Office to Addressee" Service.

EXPRESS MAIL CERTIFICATE

Page 1 of 2

PCTUS1/REV03

U.S. A	PPLICATION	NO OF KNOWN STATES	INTÉRNATIONAL A				DOCKET NUMBER	
			PCT/NI	L00/005	59	294-12	0 PCT/US	
24.		llowing fees are submitted:	(-)			CALCULATION	S PTO USE ONLY	
BASI	Neither inte	AL FEE (37 CFR 1.492 (a) (1) - emational preliminary examination al search fee (37 CFR 1.445(a)(2)) tional Search Report not prepared	n fee (37 CFR 1.482) n		\$1040.00			
⊠		al preliminary examination fee (37) International Search Report prepare						
	Internationa	al preliminary examination fee (37 ional search fee (37 CFR 1.445(a)						
	The state of the s							
	International preliminary examination fee (37 CFR 1.482) paid to USPTO and all claims satisfied provisions of PCT Article 33(1)-(4)							
		ENTER APPROPRI	\$890.00					
Surcha month	arge of \$130. s from the ea	00 for furnishing the oath or declaritiest claimed priority date (37 C	\$0.00					
CL	AIMS	NUMBER FILED	NUMBER EXT	'RA	RATE			
Total claims		21 - 20 =	1		x \$18.00	\$18.00		
Indepe	Independent claims 12 - 3 =		9		x \$84.00	\$756.00		
Multiple Dependent Claims (check if applicable).				*		\$0.00		
			ABOVE CALC			\$1,664.00		
□ A	Applicant clair educed by 1/	ims small entity status. See 37 CF 2.	R 1.27). The fees indic	ated abov	e are	\$0.00		
				SUB'	ΓΟΤΑL =	\$1,664.00		
Processing fee of \$130.00 for furnishing the English translation later than months from the earliest claimed priority date (37 CFR 1.492 (f)).						\$0.00		
			TOTAL NAT	IONA	L FEE =	\$1,664.00		
Fee fo accom	r recording the panied by an	he enclosed assignment (37 CFR) appropriate cover sheet (37 CFR	1.21(h)). The assignment 3.28, 3.31) (check if	ent must l	pe (e).	\$0.00		
			TOTAL FEES	ENCL	OSED =	\$1,664.00		
						Amount to be: refunded	\$	
						charged	\$	
a.	⊠ A c	heck in the amount of\$1,66	4.00 to cover the :	above fee	s is enclosed.			
b.		Please charge my Deposit Account No in the amount of to cover the above fees. A duplicate copy of this sheet is enclosed.						
c.	▼ The							
d.	☐ Fee	s are to be charged to a credit card	l. WARNING: Inform	nation on	this form may bed	ome public. Credit c		
	info	ormation should not be included	on this form. Provide	e credit ca	ard information an	id authorization on P	rO-2038.	
NOTE 1.137(E: Where and (a) or (b)) m	appropriate time limit under 3 ust be filed and granted to resto	7 CFR 1.494 or 1.495 re the application to j	has not pending s	been met, a petit status,	ion to revive (37 CF	R	
SEND	ALL CORR	ESPONDENCE TO:						
	ıld J. Baron,	•			SIGNATURE	o for our		
Hoffmann & Baron, LLP.					/			
6900 Jericho Turnpike Syosset, New York 11791					Ronald J. Baron			
NAME								
Telephone: 516-822-3550 Facsimile: 516-822-3582					29,281			
racsi	mne: 516-8	<u> </u>		REGISTRATION NUMBER				
					February 12,	2002		
·					DATE			